

<div style="font-size: 2em; float: left; margin-right: 10px;">A</div> <div> MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) </div>							SERIAL NO. <div style="font-size: 1.5em;">09/854148</div>		FILING DATE	
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
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